DECT AVAILABLE COPY

RATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

205,513

CLAIMS AS FILED - PART (Column 1)						mn 2)	_	SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			16					-RATE	**FEE	•	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	4	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			/ 6 minus 20=		* D/			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		* 10			X42=		OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ero, ente	r "0" in c	"0" in column 2		TOTAL	•	OR	TOTAL	740
	С	LAIMS AS A	MENDED - PART II					rei er inge egen in	e er i en der Obersee, sich	ing and a	OTHER	THAN
		(Column 1)		(Column 2) (Column 3)				SMALL E	ENTITY	OR	SMALL	NTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	*	OR	X\$18=	·
	Independent	* ENTATION OF MI	Minus	***	T CL AIRA	= ,		X42=		OR	X84=	
	FINST PRESE	NIATION OF MI	JLIIPLE DE	PENDEN	CLAIM	а		+140=		ÔŘ	÷	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		× X42= %	O PROGRAM	OR	∞X84= ∞	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	.440			.000	
							L	+140= TOTAL		OR	+280= TOTAL	
							· A	DDIT. FEE	<u> </u>	OR	ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)						!
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	The state of	ÖR	″X\$18=°	4
	Independent	*	Minus	***	TO: ****	=		X42=		OR	X84=	
Ļ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=			+280=	, I
	* If the entry in column 1 is less than the entry in column 2, writ "0" in column 3. ** If th "High st Numb r Pr viously Paid For" IN THIS SPACE is less than 20, enter "20."									OR	TOTAL	
***	If th "Highest Nu	imb r Previously P	aid For" IN TH	IS SPACE	is less tha	in 3, enter "3."	_	TOTAL DDIT. FEE			ADDIT. FEE	
	The "Highest Nun	nber Previously Pa	d For" (Total o	r Independ	lent) is the	highest numbe	er four	nd in the app	ropriate box	in col	lumn 1.	